

**United States Bankruptcy Court**  
**Eastern District of Michigan**

**Voluntary Petition**

Name of Debtor (if individual, enter Last, First, Middle): <b>Lamontagne, William Scott</b>	Name of Joint Debtor (Spouse) (Last, First, Middle): <b>Lamontagne, Diane Marie</b>
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>William S. Lamontagne</b> <b>Bill Lamontagne</b>	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): <b>Diane M Lamontagne</b>
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>0410</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>5828</b>
Street Address of Debtor (No. & Street, City, State & Zip Code): <b>16181 Mott Drive</b> <b>Macomb, MI</b>	Street Address of Joint Debtor (No. & Street, City, State & Zip Code): <b>16181 Mott Drive</b> <b>Macomb, MI</b>
ZIPCODE	ZIPCODE
County of Residence or of the Principal Place of Business: <b>Macomb</b>	County of Residence or of the Principal Place of Business: <b>Macomb</b>
Mailing Address of Debtor (if different from street address)	Mailing Address of Joint Debtor (if different from street address):
ZIPCODE	ZIPCODE

Location of Principal Assets of Business Debtor (if different from street address above):		
ZIPCODE		
<p><b>Type of Debtor</b> (Form of Organization) (Check one box.)</p> <p><input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i></p> <p><input type="checkbox"/> Corporation (includes LLC and LLP)</p> <p><input type="checkbox"/> Partnership</p> <p><input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)</p>	<p><b>Nature of Business</b> (Check one box.)</p> <p><input type="checkbox"/> Health Care Business</p> <p><input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B)</p> <p><input type="checkbox"/> Railroad</p> <p><input type="checkbox"/> Stockbroker</p> <p><input type="checkbox"/> Commodity Broker</p> <p><input type="checkbox"/> Clearing Bank</p> <p><input type="checkbox"/> Other</p>	<p><b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.)</p> <p><input checked="" type="checkbox"/> Chapter 7</p> <p><input type="checkbox"/> Chapter 9</p> <p><input type="checkbox"/> Chapter 11</p> <p><input type="checkbox"/> Chapter 12</p> <p><input type="checkbox"/> Chapter 13</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding</p> <p><input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding</p>
<p><b>Tax-Exempt Entity</b> (Check box, if applicable.)</p> <p><input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).</p>		
<p><b>Nature of Debts</b> (Check one box.)</p> <p><input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."</p> <p><input type="checkbox"/> Debts are primarily business debts.</p>		
<p><b>Filing Fee</b> (Check one box)</p> <p><input checked="" type="checkbox"/> Full Filing Fee attached</p> <p><input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.</p> <p><input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.</p>		<p><b>Chapter 11 Debtors</b></p> <p><b>Check one box:</b></p> <p><input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p><input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).</p> <p><b>Check if:</b></p> <p><input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>).</p> <p><b>Check all applicable boxes:</b></p> <p><input type="checkbox"/> A plan is being filed with this petition</p> <p><input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).</p>

<b>Statistical/Administrative Information</b>											THIS SPACE IS FOR COURT USE ONLY
<p><input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors.</p> <p><input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.</p>											
<b>Estimated Number of Creditors</b>											
<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	1-49      50-99      100-199      200-999      1,000- 5,000      5,001- 10,000      10,001- 25,000      25,001- 50,000      50,001- 100,000      Over 100,000										
<b>Estimated Assets</b>											
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	\$0 to \$50,000      \$50,001 to \$100,000      \$500,000      \$1 million      \$10 million      \$10,000,001      \$50,000,001 to \$100,000,001      \$500,000,001      \$1 billion      \$1 billion										
<b>Estimated Liabilities</b>											
<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	\$0 to \$50,000      \$50,001 to \$100,000      \$500,000      \$1 million      \$10 million      \$10,000,001      \$50,000,001 to \$100,000,001      \$500,000,001      \$1 billion      \$1 billion										

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Lamontagne, William Scott &amp; Lamontagne, Diane Marie</b>	
<b>Prior Bankruptcy Case Filed Within Last 8 Years</b> (If more than two, attach additional sheet)			
Location Where Filed: <b>None</b>	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
<b>Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor</b> (If more than one, attach additional sheet)			
Name of Debtor: <b>None</b>	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)		<b>Exhibit B</b> (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.	
<input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>X</b> <i>/s/ Jessica M. Lane</i> <b>8/03/10</b> <small>Signature of Attorney for Debtor(s)</small>	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
<b>Exhibit D</b> (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
<b>Information Regarding the Debtor - Venue</b> <small>(Check any applicable box.)</small> <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
<b>Certification by a Debtor Who Resides as a Tenant of Residential Property</b> <small>(Check all applicable boxes.)</small> <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)  <small>(Name of landlord or lessor that obtained judgment)</small> <small>(Address of landlord or lessor)</small> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<b>Voluntary Petition</b> <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): <b>Lamontagne, William Scott &amp; Lamontagne, Diane Marie</b>	
<b>Signatures</b>			
<b>Signature(s) of Debtor(s) (Individual/Joint)</b>		<b>Signature of a Foreign Representative</b>	
<p>I declare under penalty of perjury that the information provided in this petition is true and correct.</p> <p>[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.</p> <p>[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p>		<p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p>	
<b>X</b> <u>/s/ William S. Lamontagne</u> Signature of Debtor <b>William S. Lamontagne</b>		<b>X</b> _____ Signature of Foreign Representative	
<b>X</b> <u>/s/ Diane Marie Lamontagne</u> Signature of Joint Debtor <b>Diane Marie Lamontagne</b>		Printed Name of Foreign Representative _____	
Telephone Number (If not represented by attorney) _____		Date _____	
<b>August 3, 2010</b> Date		<b>Signature of Attorney*</b>	
<b>X</b> <u>/s/ Jessica M. Lane</u> Signature of Attorney for Debtor(s)		<b>Signature of Non-Attorney Petition Preparer</b>	
<b>Jessica M. Lane P66899</b> <b>Attorney at Law</b> <b>43805 Van Dyke Ave.</b> <b>Sterling Heights, MI 48314</b> <b>(586) 247-7702 Fax: (586) 247-7705</b> <b>jessica@lanelaw.biz</b>		<p>I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p>	
<b>August 3, 2010</b> Date		Printed Name and title, if any, of Bankruptcy Petition Preparer _____	
*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.		Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) _____	
<b>Signature of Debtor (Corporation/Partnership)</b>		Address _____	
<p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p>		<b>X</b> _____ Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.	
<b>X</b> _____ Signature of Authorized Individual		Date _____	
Printed Name of Authorized Individual _____		Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:	
Title of Authorized Individual _____		<p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.</i></p>	
Date _____			

**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
<b>Residence located at 16181 Mott Drive, Macomb, MI 48044. 2010 SEV = 120,180.</b>	<b>Tenancy by the Entirety</b>	<b>J</b>	<b>225,000.00</b>	<b>285,452.88</b>
			<b>TOTAL</b>	<b>225,000.00</b>

(Report also on Summary of Schedules)

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	
			HUSBAND, WIFE, JOINT, OR COMMUNITY	
1. Cash on hand.	X	<b>Michigan Catholic Credit Union savings account</b>	H	<b>7.00</b>
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>PNC Bank checking &amp; savings accounts</b>	W	<b>10.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	X	<b>PNC Bank checking account</b>	H	<b>230.00</b>
4. Household goods and furnishings, include audio, video, and computer equipment.		<b>PNC Bank checking account for Debtor Husband's Heating &amp; Cooling d/b/a</b>	H	<b>2,712.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X	<b>Household furniture &amp; furnishings, no single asset exceeds \$550.00 in value</b>	J	<b>12,000.00</b>
6. Wearing apparel.		<b>Pool Table</b>	J	<b>800.00</b>
7. Furs and jewelry.		<b>Two household computers</b>	J	<b>400.00</b>
8. Firearms and sports, photographic, and other hobby equipment.	X	<b>Debtors &amp; Debtors' minor children's clothing</b>	J	<b>4,000.00</b>
		<b>Wedding rings</b>	J	<b>2,000.00</b>
		<b>Browning shotgun</b>	H	<b>200.00</b>
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X	<b>Miscellaneous sports &amp; exercise equipment, no single asset \$550.00</b>	J	<b>1,000.00</b>
10. Annuities. Itemize and name each issue.	X	<b>Remington 7400 Rifle</b>	H	<b>600.00</b>
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X	<b>Smith &amp; Wesson handgun</b>	H	<b>400.00</b>

## SCHEDULE B - PERSONAL PROPERTY

## (Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.				
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X	Titanium Building Company for complete Heating & Cooling work	H	3,711.00
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X	Estimated, accrued 2010 income tax refunds	J	100.00
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2006 Harley Davison motorcycle	H	13,000.00
26. Boats, motors, and accessories.		Personal riding lawn mower	W	500.00
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X	2003 GMC Yukon	H	11,000.00

**IN RE Lamontagne, William Scott & Lamontagne, Diane Marie**

Case No.

**Debtor(s)**

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

**(Continuation Sheet)**

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
29. Machinery, fixtures, equipment, and supplies used in business.		<b>Husband's Heating &amp; Cooling work tools</b>	H	<b>3,000.00</b>
30. Inventory.	X			
31. Animals.		<b>Two family dogs</b>	J	<b>1.00</b>
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

**0** continuation sheets attached

(Include amounts from any continuation sheets attached.  
Report total also on Summary of Schedules.)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:  
(Check one box)

11 U.S.C. § 522(b)(2)  
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$146,450. \*

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
Michigan Catholic Credit Union savings account	11 USC § 522(d)(5)	7.00	7.00
PNC Bank checking account	11 USC § 522(d)(5)	230.00	230.00
PNC Bank checking account for Debtor Husband's Heating & Cooling d/b/a	11 USC § 522(d)(5)	2,712.00	2,712.00
Household furniture & furnishings, no single asset exceeds \$550.00 in value	11 USC § 522(d)(3)	6,000.00	12,000.00
Pool Table	11 USC § 522(d)(5)	400.00	800.00
Two household computers	11 USC § 522(d)(5)	200.00	400.00
Debtors & Debtors' minor children's clothing	11 USC § 522(d)(3)	2,000.00	4,000.00
Wedding rings	11 USC § 522(d)(4)	1,000.00	2,000.00
Browning shotgun	11 USC § 522(d)(3)	200.00	200.00
Miscellaneous sports & exercise equipment, no single asset \$550.00	11 USC § 522(d)(3)	500.00	1,000.00
Remington 7400 Rifle	11 USC § 522(d)(5)	600.00	600.00
Smith & Wesson handgun	11 USC § 522(d)(3)	400.00	400.00
Titanium Building Company for complete Heating & Cooling work	11 USC § 522(d)(5)	3,711.00	3,711.00
Estimated, accrued 2010 income tax refunds	11 USC § 522(d)(5)	50.00	100.00
2006 Harley Davison motorcycle	11 USC § 522(d)(2) 11 USC § 522(d)(5)	3,450.00 2,066.57	13,000.00
Personal riding lawn mower	11 USC § 522(d)(2)	250.00	500.00
2003 GMC Yukon	11 USC § 522(d)(5)	203.01	11,000.00
Husband's Heating & Cooling work tools	11 USC § 522(d)(6)	3,000.00	3,000.00
Two family dogs	11 USC § 522(d)(3)	0.50	1.00

\* Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

IN RE Lamontagne, Diane Marie

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:  
(Check one box)

11 U.S.C. § 522(b)(2)  
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$146,450. \*

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
<b><u>SCHEDULE B - PERSONAL PROPERTY</u></b>			
<b>PNC Bank checking &amp; savings accounts</b>	<b>11 USC § 522(d)(5)</b>	<b>10.00</b>	<b>10.00</b>
<b>Household furniture &amp; furnishings, no single asset exceeds \$550.00 in value</b>	<b>11 USC § 522(d)(3)</b>	<b>6,000.00</b>	<b>12,000.00</b>
<b>Pool Table</b>	<b>11 USC § 522(d)(5)</b>	<b>400.00</b>	<b>800.00</b>
<b>Two household computers</b>	<b>11 USC § 522(d)(5)</b>	<b>200.00</b>	<b>400.00</b>
<b>Debtors &amp; Debtors' minor children's clothing</b>	<b>11 USC § 522(d)(3)</b>	<b>2,000.00</b>	<b>4,000.00</b>
<b>Wedding rings</b>	<b>11 USC § 522(d)(4)</b>	<b>1,000.00</b>	<b>2,000.00</b>
<b>Miscellaneous sports &amp; exercise equipment, no single asset \$550.00</b>	<b>11 USC § 522(d)(3)</b>	<b>500.00</b>	<b>1,000.00</b>
<b>Estimated, accrued 2010 income tax refunds</b>	<b>11 USC § 522(d)(5)</b>	<b>50.00</b>	<b>100.00</b>
<b>Personal riding lawn mower</b>	<b>11 USC § 522(d)(2)</b>	<b>250.00</b>	<b>500.00</b>
<b>Two family dogs</b>	<b>11 USC § 522(d)(3)</b>	<b>0.50</b>	<b>1.00</b>

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR  HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY	
			CONTINGENT	UNLIQUIDATED	DISPUTED		
ACCOUNT NO. <b>7526</b>  <b>HSBC Retail Services</b> <b>Art Van</b> <b>P.O. Box 7680</b> <b>Carol Stream, IL 60116-7680</b>	<b>H</b>	<b>Furniture expense</b>				<b>8,139.03</b>	
VALUE \$ <b>12,000.00</b>							
ACCOUNT NO.  <b>HSBC</b> <b>Payment Processing Center</b> <b>P.O. Box 5243</b> <b>Carol Stream, IL 60197-9918</b>		<b>Assignee or other notification for: HSBC Retail Services</b>					
VALUE \$							
ACCOUNT NO. <b>1002</b>  <b>Michigan Catholic Credit Union</b> <b>255 East Maple Road</b> <b>Troy, MI 48083</b>	<b>H</b>	<b>Loan obtained to purchase 2003 GMC Yukon</b>				<b>10,796.99</b>	
VALUE \$ <b>11,000.00</b>							
ACCOUNT NO. <b>1001</b>  <b>Michigan Catholic Credit Union</b> <b>255 East Maple Road</b> <b>Troy, MI 48083</b>	<b>H</b>	<b>Loan obtained to purchase 2006 Harley Davison motorcycle</b>				<b>7,483.43</b>	
VALUE \$ <b>13,000.00</b>							
Subtotal (Total of this page)			\$ <b>26,419.45</b>			\$	
Total (Use only on last page)			\$			\$	

1 continuation sheets attached

Subtotal  
(Total of this page)

Total  
(Use only on last page)

(Report also on  
Summary of  
Schedules.)  
(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

## (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL			UNSECURED PORTION, IF ANY
			CONTINGENT	UNLIQUIDATED	DISPUTED	
ACCOUNT NO. <b>0330</b>	<b>J</b>	<b>Home equity loan secured by Debtors' residence located at 16181 Mott Drive, Macomb, MI 48044.</b>				<b>49,791.75</b>
<b>Washington Mutual P.O. Box 78065 Phoenix, AZ 85062-8065</b>		VALUE \$ <b>225,000.00</b>				<b>49,791.75</b>
ACCOUNT NO.		<b>Assignee or other notification for: Washington Mutual</b>				
<b>GC Services Limited Partnership Collection Agency Division 6330 Gulfton Houston, TX 77081</b>		VALUE \$				
ACCOUNT NO.		<b>Assignee or other notification for: Washington Mutual</b>				
<b>Professional Recovery Services Inc. P.O. Box 1880 Voorhees, NJ 08043</b>		VALUE \$				
ACCOUNT NO. <b>7018</b>	<b>J</b>	<b>Loan obtained to refinance loan secured by Debtors' residence located at 16181 Mott Drive, Macomb, MI 48044.</b>				<b>235,661.13</b>
<b>Wells Fargo Home Mortgage P.O. Box 6423 Carol Stream, IL 60197-6423</b>		VALUE \$ <b>225,000.00</b>				<b>10,661.13</b>
ACCOUNT NO.						
		VALUE \$				
ACCOUNT NO.						
		VALUE \$				

Sheet no. **1** of **1** continuation sheets attached to  
Schedule of Creditors Holding Secured Claims

Subtotal (Total of this page)	<b>\$ 285,452.88</b>	<b>\$ 60,452.88</b>
Total (Use only on last page)	<b>\$ 311,872.33</b>	<b>\$ 60,452.88</b>

(Report also on  
Summary of  
Schedules.)

(If applicable, report  
also on Statistical  
Summary of Certain  
Liabilities and Related  
Data.)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,775\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 **Deposits by individuals**

Claims of individuals up to \$2,600\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
**(Continuation Sheet)**

**Taxes and Other Certain Debts Owed to Governmental Units**

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. <b>0410</b> <b>State Of Michigan</b> <b>DELEG - Unemployment Agency</b> <b>P.O. Box 9045</b> <b>Detroit, MI 48202-9045</b>	H	<b>Disputed overpayment of unemployment payments</b>		X		<b>362.00</b>	<b>362.00</b>	
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
Sheet no. <b>1</b> of <b>1</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims			Subtotal (Totals of this page)	\$ <b>362.00</b>	\$ <b>362.00</b>	\$		
			Total (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$ <b>362.00</b>				
			Total (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)		\$ <b>362.00</b>	\$		

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2110 <b>Beaumont Hospital - Grosse Pointe P.O. Box 5042 Troy, MI 48007-5042</b>	H	<b>Medical expense</b>				<b>34.63</b>
ACCOUNT NO. 2002 <b>Beaumont Hospitals Business Center 750 Stephenson Highway, P.O. Box 5042 Troy, MI 48007-5042</b>	H	<b>Medical expense</b>				<b>118.00</b>
ACCOUNT NO. 9153 <b>Beaumont Reference Laboratory P.O. Box 5043 Troy, MI 48007-5043</b>	W	<b>Medical expense</b>				<b>69.16</b>
ACCOUNT NO. 2875 <b>Beaumont Reference Laboratory P.O. Box 5043 Troy, MI 48007-5043</b>	W	<b>Medical expense</b>				<b>6.88</b>
<b>9 continuation sheets attached</b>			Subtotal (Total of this page)			<b>\$ 228.67</b>
			Total			
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			
						\$

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. <b>2768</b>  <b>Beaumont Reference Laboratory</b> <b>P.O. Box 5043</b> <b>Troy, MI 48007-5043</b>	J	<b>Medical expense for minor daughter</b>			<b>13.27</b>
ACCOUNT NO. <b>2977</b>  <b>Beaumont Reference Laboratory</b> <b>P.O. Box 5043</b> <b>Troy, MI 48007-5043</b>	W	<b>Medical expense</b>			<b>15.88</b>
ACCOUNT NO. <b>4903</b>  <b>Charter One Bank</b> <b>One Citizens Plaza</b> <b>Providence, RI 02903</b>	H	<b>Overdraft expense for Charter One checking &amp; savings account that was closed ~ Jan/Feb, 2009.</b>			<b>289.10</b>
ACCOUNT NO.  <b>BYL Collection Services, LLC</b> <b>301 Lacey Street</b> <b>West Chester, PA 19382</b>		<b>Assignee or other notification for: Charter One Bank</b>			
ACCOUNT NO.  <b>Charter One Bank</b> <b>DDA Recovery RJE245</b> <b>P.O. Box 42023</b> <b>Providence, RI 02940</b>		<b>Assignee or other notification for: Charter One Bank</b>			
ACCOUNT NO.  <b>Delta Management Associates Inc.</b> <b>100 Everett Avenue, Ste. 6</b> <b>P.O. Box 9191</b> <b>Chelsea, MA 02150</b>		<b>Assignee or other notification for: Charter One Bank</b>			
ACCOUNT NO. <b>2292</b>  <b>Chrysler Financial</b> <b>P.O. Box 9001921</b> <b>Louisville, KY 40290-1921</b>	H	<b>Deficiency after repossession &amp; sale of 2007 Chrysler Mini Van in April, 2009.</b>			<b>6,223.50</b>
Sheet no. <b>1</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>6,541.75</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

IN RE Lamontagne, William Scott &amp; Lamontagne, Diane Marie

Case No. \_\_\_\_\_

Debtor(s)

(If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
				DISPUTED	
ACCOUNT NO. <b>Asset Acquisition Group, LLC</b> P.O. Box 370470 Denver, CO 80237-0470		Assignee or other notification for: <b>Chrysler Financial</b>			
ACCOUNT NO. <b>Focus Receivables Management</b> 1130 Northchase Parkway, Ste. 150 Marietta, GA 30067		Assignee or other notification for: <b>Chrysler Financial</b>			
ACCOUNT NO. <b>0870</b> <b>City Of Fraser</b> P.O. Box 2122 Riverview, MI 48193-1122	W	<b>Medical expense</b>			<b>80.86</b>
ACCOUNT NO. <b>9768</b> <b>Comcast</b> 1500 Market St., Floor 33e Philadelphia, PA 19102-4782	H	<b>Disputed cable television expense</b>	X		<b>144.48</b>
ACCOUNT NO. <b>Credit Protection Association LP</b> P.O. Box 802068 Dallas, TX 75380-2068		Assignee or other notification for: <b>Comcast</b>			
ACCOUNT NO. <b>0051</b> <b>Complete Fitness Rehabilitation</b> 2075 West Big Beaver, Ste. 601 Troy, MI 48084	J	<b>Medical expense for minor daughter</b>			<b>171.50</b>
ACCOUNT NO. <b>4871</b> <b>Discover Card</b> P.O. Box 6103 Carol Stream, IL 60197-6103	H	<b>Closed account that was used for miscellaneous expenses. Collection lawsuit pending in the 41A Judicial District Court, Shelby Twp., Case No. US10-24703-GC.</b>			<b>16,574.27</b>
Sheet no. <b>2</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>16,971.11</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

IN RE Lamontagne, William Scott &amp; Lamontagne, Diane Marie

Case No. \_\_\_\_\_

Debtor(s)

(If known)

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Buckles &amp; Buckles, PLC P.O. Box 1150 Birmingham, MI 48012</b>		<b>Assignee or other notification for: Discover Card</b>			
ACCOUNT NO. <b>4979</b> <b>Eastpointe Radiologists PC 36175 Harper Ave. Clinton Township, MI 48035</b>	H	<b>Medical expense</b>			<b>115.00</b>
ACCOUNT NO. <b>0571</b> <b>Eastside Endoscopy Center 28963 Little Mack, #103 St. Clair Shores, MI 48081</b>	H	<b>Medical expense</b>			<b>401.63</b>
ACCOUNT NO. <b>1765</b> <b>GI Medicine Associates PC 28963 Little Mack, #101 St. Clair Shores, MI 48081</b>	H	<b>Medical expense</b>			<b>947.28</b>
ACCOUNT NO. <b>First Federal Credit Control, Inc. 24700 Chagrin Blvd., Ste. 205 Cleveland, OH 44122-5662</b>		<b>Assignee or other notification for: GI Medicine Associates PC</b>			
ACCOUNT NO. <b>6984</b> <b>Grosse Pointe Anesthesiologists PC P.O. Box 77124 Detroit, MI 48277</b>	J	<b>Medical expense for minor daughter</b>			<b>41.85</b>
ACCOUNT NO. <b>8055</b> <b>Henry Ford Macomb Hospital P.O. Box 223015 Pittsburgh, PA 15251-2015</b>	J	<b>Medical expense for minor daughter</b>			<b>100.00</b>
Sheet no. <b>3</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>1,605.76</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. <b>9309</b> <b>Henry Ford Macomb Hospital</b> <b>P.O. Box 674144</b> <b>Detroit, MI 48267-4144</b>	J	<b>Medical expense</b>			<b>797.89</b>
ACCOUNT NO. <b>6007</b> <b>Home Depot Credit Services</b> <b>Processing Center</b> <b>Des Moines, IA 50364-0500</b>	H	<b>Closed account that was used for home improvement expenses.</b>			<b>7,426.11</b>
ACCOUNT NO. <b>Citi</b> <b>P.O. Box 653095</b> <b>Dallas, TX 75265</b>		<b>Assignee or other notification for: Home Depot Credit Services</b>			
ACCOUNT NO. <b>LTD Financial Services LP</b> <b>7322 Southwest Freeway, Ste. 1600</b> <b>Houston, TX 77074</b>		<b>Assignee or other notification for: Home Depot Credit Services</b>			
ACCOUNT NO. <b>2703</b> <b>Lakepointe Radiology PC</b> <b>P.O. Box 77000, D771336</b> <b>Detroit, MI 48277-1336</b>	H	<b>Medical expense</b>			<b>8.61</b>
ACCOUNT NO. <b>8665</b> <b>LG Barbe MD PC</b> <b>25990 Kelly Rd., Ste. 1</b> <b>Roseville, MI 48066</b>	H	<b>Medical expense</b>			<b>40.00</b>
ACCOUNT NO. <b>5811</b> <b>Macomb Eye Care Specialists</b> <b>37555 Garfield, Ste. 100</b> <b>Clinton Twp., MI 48036</b>	H	<b>Medical expense</b>			<b>177.42</b>
Sheet no. <b>4</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>8,450.03</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Congress Collection Corp 24901 Northwestern Hwy, Ste. 300 Southfield, MI 48075</b>		<b>Assignee or other notification for: Macomb Eye Care Specialists</b>			
ACCOUNT NO. <b>8510</b> <b>Macomb MRI Kirkwood Professional Bldg. 42700 Schoenherr, Ste. 4 Sterling Heights, MI 48313</b>	H	<b>Medical expense</b>			<b>326.03</b>
ACCOUNT NO. <b>7640</b> <b>Macomb Prompt Care Macomb Beaumont Medical Center 43455 Schoenherr Rd., Ste. 19 Sterling Heights, MI 48313</b>	H	<b>Medical expense</b>			<b>136.53</b>
ACCOUNT NO. <b>Client Financial Services P.O. Box 7049 Flint, MI 48507-0049</b>		<b>Assignee or other notification for: Macomb Prompt Care</b>			
ACCOUNT NO. <b>1320</b> <b>Macy's P.O. Box 689195 Des Moines, IA 50368-9195</b>	H	<b>Closed account that was used for clothing expenses.</b>			<b>1,897.61</b>
ACCOUNT NO. <b>Northland Group, Inc. P.O. Box 390846 Minneapolis, MN 55439</b>		<b>Assignee or other notification for: Macy's</b>			
ACCOUNT NO. <b>6620</b> <b>Macy's P.O. Box 689195 Des Moines, IA 50368-9195</b>	W	<b>Closed account that was used for clothing expenses.</b>			<b>1,892.85</b>
Sheet no. <b>5</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>4,253.02</b>	
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>Northland Group, Inc. P.O. Box 390846 Minneapolis, MN 55439</b>			<b>Assignee or other notification for: Macy's</b>				
ACCOUNT NO. <b>2965</b> <b>Medstar Ambulance Service 380 N. Gratiot Ave. Clinton Township, MI 48036</b>		<b>H</b>	<b>Medical expense</b>				<b>82.09</b>
ACCOUNT NO. <b>4650</b> <b>Michigan Catholic Credit Union 255 East Maple Road Troy, MI 48083</b>		<b>J</b>	<b>Closed account that was used for miscellaneous expenses. Collection lawsuit pending in the 41A Judicial District Court, Shelby Township, MI.</b>				<b>8,412.70</b>
ACCOUNT NO. <b>The Leduc Group, PLLC 4 Parklane Boulevard, Ste. 350 Dearborn, MI 48126</b>			<b>Assignee or other notification for: Michigan Catholic Credit Union</b>				
ACCOUNT NO. <b>6808</b> <b>Mount Clemens Regional Medical Center P.O. Box 673532 Detroit, MI 48267-3532</b>		<b>H</b>	<b>Medical expenses</b>	<b>X</b>			<b>203.25</b>
ACCOUNT NO. <b>Senex Services Corp. P.O. Box 505 Linden, MI 48451-0505</b>			<b>Assignee or other notification for: Mount Clemens Regional Medical Center</b>				
ACCOUNT NO. <b>5688</b> <b>Nestor J. Truccone MD 43380 Woodward Ave., Ste 105 Bloomfield Hills, MI 48302</b>		<b>J</b>	<b>Medical expense for minor daughter</b>				<b>55.18</b>
Sheet no. <b>6</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)			<b>\$ 8,753.22</b>
				Total			
				(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			
							<b>\$</b>

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. <b>14MA</b>  <b>Outreach</b> <b>43455 Schoenherr, Ste. 2</b> <b>Sterling Heights, MI 48313</b>		H	<b>Medical expense</b>				<b>70.87</b>
ACCOUNT NO. <b>2871</b>  <b>Path Specialists Of SE Mich PC</b> <b>P.O. Box 380890</b> <b>Clinton Township, MI 48038-0073</b>		H	<b>Medical expense</b>				<b>320.00</b>
ACCOUNT NO. <b>2NNE</b>  <b>Premier Orthopedics &amp; Sports Med PC</b> <b>20860 Harper Ave.</b> <b>Harper Woods, MI 48225</b>		H	<b>Medical expense</b>				<b>244.58</b>
ACCOUNT NO.  <b>Congress Collection Corp</b> <b>24901 Northwestern Hwy, Ste. 300</b> <b>Southfield, MI 48075</b>			<b>Assignee or other notification for: Premier Orthopedics &amp; Sports Med PC</b>				
ACCOUNT NO. <b>6948</b>  <b>Professional Emerg Care</b> <b>P.O. Box 1257</b> <b>Troy, MI 48099-1257</b>		H	<b>Medical expense</b>				<b>20.00</b>
ACCOUNT NO. <b>4255</b>  <b>Professional Emerg Care</b> <b>P.O. Box 1257</b> <b>Troy, MI 48099-1257</b>		H	<b>Medical expense</b>				<b>280.38</b>
ACCOUNT NO. <b>6406</b>  <b>Rochester Knee &amp; Sports Medicine PC</b> <b>3100 Cross Creek Parkway, Ste. 200</b> <b>Auburn Hills, MI 48326</b>		H	<b>Medical expense</b>				<b>120.77</b>
Sheet no. <b>7</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)			<b>\$ 1,056.60</b>
				Total			
				(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)			
							<b>\$</b>

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. <b>3022</b>  <b>Sam's Club/GEMB</b> <b>P.O. Box 530942</b> <b>Atlanta, GA 30353-0942</b>	H	<b>Open account that was used for miscellaneous purchases.</b>	X		<b>1,680.48</b>
ACCOUNT NO. <b>2254</b>  <b>Sears Credit Cards</b> <b>P.O. Box 183081</b> <b>Columbus, OH 43218-3081</b>	H	<b>Closed account that was used for miscellaneous expenses</b>			<b>5,895.27</b>
ACCOUNT NO.  <b>Midland Credit Management, Inc.</b> <b>P.O. Box 60578</b> <b>Los Angeles, CA 90060-0578</b>		<b>Assignee or other notification for: Sears Credit Cards</b>			
ACCOUNT NO. <b>6918</b>  <b>Shores Podiatry Assoc, PC</b> <b>20905 Twelve Mile Rd., Ste. 100</b> <b>Roseville, MI 48066</b>	J	<b>Medical expense for minor daughter</b>			<b>55.71</b>
ACCOUNT NO. <b>5846</b>  <b>St. John Hospital</b> <b>3179 Solutions Center</b> <b>Chicago, IL 60677-3001</b>	H	<b>Medical expense</b>			<b>223.00</b>
ACCOUNT NO.  <b>Medical Financial Solutions</b> <b>28000 Dequindre</b> <b>Warren, MI 48092</b>		<b>Assignee or other notification for: St. John Hospital</b>			
ACCOUNT NO. <b>1010</b>  <b>Todd R. Wood DDS</b> <b>13552 Martin Road</b> <b>Warren, MI 48088</b>	H	<b>Medical expense</b>			<b>336.60</b>
Sheet no. <b>8</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)	\$ <b>8,191.06</b>	
			Total		
			(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
				\$	

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

## (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM
ACCOUNT NO. <b>William A. Lamontagne 22280 John Deere Ln Macomb, MI 48044</b>	H	<b>Material expense</b>			<b>2,600.00</b>
ACCOUNT NO. 2003 <b>William Beaumont Hospital 500 Stevenson Highway Troy, MI 48007-5042</b>	J	<b>Medical expense for minor daughter</b>			<b>480.38</b>
ACCOUNT NO. 5368 <b>William Beaumont Hospital Business Center 500 Stevenson Highway, P.O. Box 5042 Troy, MI 48007-5042</b>	J	<b>Medical expense for minor daughter</b>			<b>603.46</b>
ACCOUNT NO. 3181 <b>William Beaumont Hospital Business Center 500 Stevenson Highway, P.O. Box 5042 Troy, MI 48007-5042</b>	H	<b>Medical expense</b>			<b>118.00</b>
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
ACCOUNT NO.					
Sheet no. <b>9</b> of <b>9</b> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal (Total of this page)		<b>\$ 3,801.84</b>
			Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		<b>\$ 59,853.06</b>

IN RE Lamontagne, William Scott &amp; Lamontagne, Diane Marie

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

IN RE Lamontagne, William Scott &amp; Lamontagne, Diane Marie

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)**

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status <b>Married</b>	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): <b>Daughter</b> <b>Daughter</b> <b>Son</b>	AGE(S): <b>17</b> <b>15</b> <b>9</b>
EMPLOYMENT:	DEBTOR	SPOUSE
Occupation <b>Service Technician</b>		
Name of Employer <b>Warren Heating &amp; Cooling, LLC</b>		
How long employed <b>1 years and 6 months</b>		
Address of Employer <b>22280 John Deere Ln</b> <b>Macomb, MI 48044</b>		

**INCOME:** (Estimate of average or projected monthly income at time case filed)

	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	\$ <b>2,550.98</b>	\$ _____
2. Estimated monthly overtime	\$ _____	\$ _____
<b>3. SUBTOTAL</b>	<b>\$ 2,550.98</b>	<b>\$ 0.00</b>

4. LESS PAYROLL DEDUCTIONS	
a. Payroll taxes and Social Security	\$ <b>438.84</b>
b. Insurance	\$ _____
c. Union dues	\$ _____
d. Other (specify) _____	\$ _____
<b>5. SUBTOTAL OF PAYROLL DEDUCTIONS</b>	<b>\$ 438.84</b>
<b>6. TOTAL NET MONTHLY TAKE HOME PAY</b>	<b>\$ 2,112.14</b>
	<b>\$ 0.00</b>

7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ _____	\$ <b>1,150.00</b>
8. Income from real property	\$ _____	\$ <b>500.00</b>
9. Interest and dividends	\$ _____	\$ _____
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ _____	\$ _____
11. Social Security or other government assistance (Specify) _____	\$ _____	\$ _____
12. Pension or retirement income	\$ _____	\$ _____
13. Other monthly income (Specify) _____	\$ _____	\$ _____
	\$ _____	\$ _____

<b>14. SUBTOTAL OF LINES 7 THROUGH 13</b>	<b>\$ 500.00</b>	<b>\$ 1,150.00</b>
<b>15. AVERAGE MONTHLY INCOME</b> (Add amounts shown on lines 6 and 14)	<b>\$ 2,612.14</b>	<b>\$ 1,150.00</b>

<b>16. COMBINED AVERAGE MONTHLY INCOME:</b> (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	<b>\$ 3,762.14</b>
--	--------------------

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:  
**Debtor Wife is actively seeking employment and Debtor Husband is seeking to increase his heating & cooling business.**

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) \$ **1,657.32**

a. Are real estate taxes included? Yes  No \_\_\_\_\_  
 b. Is property insurance included? Yes  No \_\_\_\_\_

## 2. Utilities:

a. Electricity and heating fuel \$ **400.00**  
 b. Water and sewer \$ **60.00**  
 c. Telephone \$ \_\_\_\_\_  
 d. Other **Telephone/Cable/Internet** \$ **175.00**  
**Trash Collection** \$ **16.00**

3. Home maintenance (repairs and upkeep) \$ **75.00**

4. Food \$ **1,000.00**

5. Clothing \$ **125.00**

6. Laundry and dry cleaning \$ **15.00**

7. Medical and dental expenses \$ \_\_\_\_\_

8. Transportation (not including car payments) \$ **325.00**

9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ \_\_\_\_\_

10. Charitable contributions \$ \_\_\_\_\_

11. Insurance (not deducted from wages or included in home mortgage payments)

a. Homeowner's or renter's \$ \_\_\_\_\_  
 b. Life \$ \_\_\_\_\_  
 c. Health \$ **715.00**  
 d. Auto \$ **175.00**  
 e. Other **Motorcycle Insurance** \$ **50.00**

12. Taxes (not deducted from wages or included in home mortgage payments)

(Specify) \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)

a. Auto \$ **343.10**  
 b. Other **Motorcycle** \$ **229.97**

14. Alimony, maintenance, and support paid to others \$ \_\_\_\_\_

15. Payments for support of additional dependents not living at your home \$ \_\_\_\_\_

16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ \_\_\_\_\_

17. Other **Veterinary Expenses & Food** \$ **25.00**  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

**18. AVERAGE MONTHLY EXPENSES** (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$ **5,386.39**

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:  
**Debtors intend to seek a loan modification or seek alternate housing at lower monthly cost than their current mortgage expense.**

**20. STATEMENT OF MONTHLY NET INCOME**

a. Average monthly income from Line 15 of Schedule I \$ **3,762.14**  
 b. Average monthly expenses from Line 18 above \$ **5,386.39**  
 c. Monthly net income (a. minus b.) \$ **-1,624.25**

**United States Bankruptcy Court**  
**Eastern District of Michigan**

**IN RE:**

Case No. \_\_\_\_\_

**Lamontagne, William Scott & Lamontagne, Diane Marie**Chapter **7** \_\_\_\_\_

Debtor(s)

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ <b>225,000.00</b>		
B - Personal Property	Yes	3	\$ <b>55,671.00</b>		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	2		\$ <b>311,872.33</b>	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ <b>362.00</b>	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	10		\$ <b>59,853.06</b>	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ <b>3,762.14</b>
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ <b>5,386.39</b>
TOTAL		24	\$ <b>280,671.00</b>	\$ <b>372,087.39</b>	

**United States Bankruptcy Court**  
**Eastern District of Michigan**

**IN RE:**

Case No. \_\_\_\_\_

**Lamontagne, William Scott & Lamontagne, Diane Marie**Chapter **7** \_\_\_\_\_

Debtor(s)

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ <b>0.00</b>
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ <b>362.00</b>
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ <b>0.00</b>
Student Loan Obligations (from Schedule F)	\$ <b>0.00</b>
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ <b>0.00</b>
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ <b>0.00</b>
<b>TOTAL</b>	\$ <b>362.00</b>

**State the following:**

Average Income (from Schedule I, Line 16)	\$ <b>3,762.14</b>
Average Expenses (from Schedule J, Line 18)	\$ <b>5,386.39</b>
Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 )	\$ <b>4,300.98</b>

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	\$ <b>60,452.88</b>
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ <b>362.00</b>
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	\$ <b>0.00</b>
4. Total from Schedule F	\$ <b>59,853.06</b>
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	\$ <b>120,305.94</b>

IN RE Lamontagne, William Scott & Lamontagne, Diane Marie

Case No. \_\_\_\_\_

Debtor(s)

(If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: August 3, 2010Signature: /s/ William S. Lamontagne  
William S. Lamontagne

Debtor

Date: August 3, 2010Signature: /s/ Diane Marie Lamontagne  
Diane Marie Lamontagne

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.*

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(Print or type name of individual signing on behalf of debtor)

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

United States Bankruptcy Court  
Eastern District of Michigan

IN RE:

Case No. \_\_\_\_\_

Lamontagne, William Scott & Lamontagne, Diane Marie

Chapter 7 \_\_\_\_\_

Debtor(s)

**BUSINESS INCOME AND EXPENSES**

**FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS** (Note: ONLY INCLUDE information directly related to the business operation.)

**PART A - GROSS BUSINESS INCOME FOR THE PREVIOUS 12 MONTHS:**

1. Gross Income For 12 Months Prior to Filing: \$ \_\_\_\_\_

**PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:**

2. Gross Monthly Income: \$ 1,150.00

**PART C - ESTIMATED FUTURE MONTHLY EXPENSES:**

3. Net Employee Payroll (Other Than Debtor) \$ \_\_\_\_\_

4. Payroll Taxes \$ \_\_\_\_\_

5. Unemployment Taxes \$ \_\_\_\_\_

6. Worker's Compensation \$ \_\_\_\_\_

7. Other Taxes \$ \_\_\_\_\_

8. Inventory Purchases (Including raw materials) \$ \_\_\_\_\_

9. Purchase of Feed/Fertilizer/Seed/Spray \$ \_\_\_\_\_

10. Rent (Other than debtor's principal residence) \$ \_\_\_\_\_

11. Utilities \$ \_\_\_\_\_

12. Office Expenses and Supplies \$ \_\_\_\_\_

13. Repairs and Maintenance \$ \_\_\_\_\_

14. Vehicle Expenses \$ \_\_\_\_\_

15. Travel and Entertainment \$ \_\_\_\_\_

16. Equipment Rental and Leases \$ \_\_\_\_\_

17. Legal/Accounting/Other Professional Fees \$ \_\_\_\_\_

18. Insurance \$ \_\_\_\_\_

19. Employee Benefits (e.g., pension, medical, etc.) \$ \_\_\_\_\_

20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts (Specify): \$ \_\_\_\_\_

21. Other (Specify): \$ \_\_\_\_\_

22. Total Monthly Expenses (Add items 3-21) \$ \_\_\_\_\_

**PART D - ESTIMATED AVERAGE NET MONTHLY INCOME**

23. **AVERAGE NET MONTHLY INCOME** (Subtract Item 22 from Item 2) \$ 1,150.00

**United States Bankruptcy Court**  
**Eastern District of Michigan**

IN RE:

Case No. \_\_\_\_\_

Lamontagne, William Scott & Lamontagne, Diane Marie

Chapter 7 \_\_\_\_\_

Debtor(s)

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

**DEFINITIONS**

**"In business."** A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

**"Insider."** The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

**1. Income from employment or operation of business**

**None** State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>108,987.00</b>	<b>2008 - IAC International Automotive Components (Husband)</b>
<b>14,400.00</b>	<b>2009 - Warren Heating &amp; Cooling, LLC (Husband)</b>
<b>8,600.00</b>	<b>2009 - Wife's contract labor</b>
<b>18,782.75</b>	<b>2010 - Warren Heating &amp; Cooling, LLC (Husband)</b>
<b>7,650.00</b>	<b>2010 - Wife's contract labor</b>

**2. Income other than from employment or operation of business**

**None** State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
<b>1,448.00</b>	<b>2008 - State of Michigan, Unemployment Insurance Agency (Husband)</b>
<b>15,280.00</b>	<b>2009 - State of Michigan, Unemployment Insurance Agency (Husband)</b>
<b>12,823.26</b>	<b>2009 - Wells Fargo Retirement Account Distribution</b>
<b>5,500.00</b>	<b>2009 - Rental Income</b>
<b>3,500.00</b>	<b>2010 - Rental Income</b>

### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

None a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
<b>Michigan Catholic Credit Union</b> 255 East Maple Road Troy, MI 48083	<b>May, June, July, 2010 payments</b>	<b>1,719.21</b>	<b>0.00</b>
<b>Wells Fargo Home Mortgage</b> P.O. Box 6423 Carol Stream, IL 60197-6423	<b>May &amp; June, 2010 payments</b>	<b>3,314.64</b>	<b>0.00</b>

None b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850.\* If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\*Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
<b>Discover Bank v. William Lamontagne; US10-24703-GC</b>	<b>Collection</b>	<b>41A Judicial District Court, Shelby Township, MI</b>	<b>Pending</b>
<b>Michigan Catholic Credit Union v. William Lamontagne &amp; Diane Lamontagne; US10-25268-GC</b>	<b>Collection</b>	<b>41A Judicial District Court, Shelby Township, MI</b>	<b>Pending</b>

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 5. Repossessions, foreclosures and returns

None a. List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 7. Gifts

None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

## 9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>Cricket Debt Counseling</b> <b>10121 SE Sunnyside Rd., Ste. 300</b> <b>Clackamas, OR 97015</b>	<b>7/29/10</b>	<b>36.00</b>
<b>Jessica M. Lane</b> <b>53805 Van Dyke Ave.</b> <b>Sterling Heights, MI 48314</b>	<b>7/29/10</b>	<b>1,700.00</b>

## 10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

## 11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
<b>Wells Fargo Bank NA</b> <b>Accounts Under TEFRA</b> <b>733 Marquette Ave.</b> <b>Minneapolis, MN 55479</b>	<b>Retirement Account</b>	<b>\$12,823.26</b>
<b>Michigan Catholic Credit Union</b> <b>255 East Maple Road</b> <b>Troy, MI 48083</b>	<b>Savings &amp; checking account</b>	<b>Closed by credit union. Zero balance.</b>
<b>Charter One Bank</b> <b>One Citizens Plaza</b> <b>Providence, RI 02903</b>	<b>Checking &amp; Savings accounts</b>	<b>Closed by Bank. Zero balance.</b>

## 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### 13. Setoffs

**None** List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

None List all property owned by another person that the debtor holds or controls.

**15. Prior address of debtor**

**None** If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

## **16. Spouses and Former Spouses**

**None** If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

## 17. Environmental Information

For the purpose of this question, the following definitions apply:

“Environmental Law” means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

“Site” means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

“Hazardous Material” means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None  a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.*

*If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.*

NAME	LAST FOUR DIGITS OF SOCIAL- SECURITY OR OTHER INDIVIDUAL	TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
<b>Diane Marie Lamontagne</b>		<b>xxx-xx-5828</b>	<b>16181 Mott Drive Macomb, MI 48044</b>	<b>Administrative &amp; 2009 to present cleaning services</b>	

**None** b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

## **19. Books, records and financial statements**

**None** a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.



**None** b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

**None** c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.



**None** d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the **two years** immediately preceding the commencement of the case by the debtor.

## **20. Inventories**

**None** a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.



**None** b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

## **21. Current Partners, Officers, Directors and Shareholders**

**None** a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.



**None** b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

## **22. Former partners, officers, directors and shareholders**

**None** a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.



**None** b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

## **23. Withdrawals from a partnership or distributions by a corporation**

**None** If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

## **24. Tax Consolidation Group**

**None** If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.



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**25. Pension Funds.**

**None** If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

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*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: **August 3, 2010**

Signature **/s/ William S. Lamontagne**  
of Debtor

**William S. Lamontagne**

Date: **August 3, 2010**

Signature **/s/ Diane Marie Lamontagne**  
of Joint Debtor  
(if any)

**Diane Marie Lamontagne**

**0** continuation pages attached

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.*

United States Bankruptcy Court  
Eastern District of Michigan

IN RE:

Case No. \_\_\_\_\_

Lamontagne, William Scott & Lamontagne, Diane Marie

Chapter 7 \_\_\_\_\_

Debtor(s)

**STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)**

The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:

1. The undersigned is the attorney for the Debtor(s) in this case.
2. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]

**FLAT FEE**

A. For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee	<b>1,700.00</b>
B. Prior to filing this statement, received .....	<b>1,700.00</b>
C. The unpaid balance due and payable is .....	<b>0.00</b>

**RETAINER**

- A. Amount of retainer received .....
- B. The undersigned shall bill against the retainer at an hourly rate of \$ ..... [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.
3. \$ 299.00 of the filing fee has been paid.
4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]
  - A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
  - D. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
  - E. ~~Reaffirmations;~~
  - F. ~~Redemptions;~~
  - G. ~~Other:~~
5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
6. The source of payments to the undersigned was from:
  - A.  Debtor(s)' earnings, wages, compensation for services performed
  - B.  Other (describe, including the identity of payor) \_\_\_\_\_
7. The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or corporation, any compensation paid or to be paid except as follows:

Date: August 3, 2010

/s/ Jessica M. Lane

Attorney for the Debtor(s)

Agreed: /s/ William S. Lamontagne  
Debtor

William S. Lamontagne

/s/ Diane Marie Lamontagne  
Debtor

Diane Marie Lamontagne

**WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2**

**UNITED STATES BANKRUPTCY COURT**

**NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b)  
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

**1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

**2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

**Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your

discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

**Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.**

**United States Bankruptcy Court**  
**Eastern District of Michigan**

**IN RE:**

Case No. \_\_\_\_\_

**Lamontagne, William Scott & Lamontagne, Diane Marie**

Chapter 7 \_\_\_\_\_

Debtor(s)

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)**  
**UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certificate of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer  
 Address:

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Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  
 (Required by 11 U.S.C. § 110.)

**X** \_\_\_\_\_

Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

**Certificate of the Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

**Lamontagne, William Scott & Lamontagne, Diane Marie**

Printed Name(s) of Debtor(s)

**X /s/ William S. Lamontagne****8/03/2010**

Signature of Debtor

Date

Case No. (if known) \_\_\_\_\_

**X /s/ Diane Marie Lamontagne****8/03/2010**

Signature of Joint Debtor (if any)

Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court  
Eastern District of Michigan

IN RE:

Case No. \_\_\_\_\_

Lamontagne, William Scott &amp; Lamontagne, Diane Marie

Chapter 7

Debtor(s)

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A** – Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
<b>Creditor's Name:</b> HSBC Retail Services	<b>Describe Property Securing Debt:</b> Household furniture & furnishings, no single asset exceeds
Property will be (check one): <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

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Property No. 2 (if necessary)	
<b>Creditor's Name:</b> Michigan Catholic Credit Union	<b>Describe Property Securing Debt:</b> 2003 GMC Yukon
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

**PART B** – Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No
Property No. 2 (if necessary)		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

1 continuation sheets attached (if any)

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date: August 3, 2010/s/ William S. Lamontagne

Signature of Debtor

/s/ Diane Marie Lamontagne

Signature of Joint Debtor

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

(Continuation Sheet)

## PART A – Continuation

Property No. 3	
<b>Creditor's Name:</b> <b>Michigan Catholic Credit Union</b>	<b>Describe Property Securing Debt:</b> <b>2006 Harley Davison motorcycle</b>

Property will be (check one):

Surrendered  Retained

If retaining the property, I intend to (check at least one):

Redeem the property  
 Reaffirm the debt  
 Other. Explain \_\_\_\_\_

(for example, avoid lien using 11 U.S.C. § 522(f)).

Property is (check one):

Claimed as exempt  Not claimed as exempt

Property No. 4	
<b>Creditor's Name:</b> <b>Washington Mutual</b>	<b>Describe Property Securing Debt:</b> <b>Residence located at 16181 Mott Drive, Macomb, MI 48044.</b>

Property will be (check one):

Surrendered  Retained

If retaining the property, I intend to (check at least one):

Redeem the property  
 Reaffirm the debt  
 Other. Explain **Debtors intend to seek a loan modification.** \_\_\_\_\_

(for example, avoid lien using 11 U.S.C. § 522(f)).

Property is (check one):

Claimed as exempt  Not claimed as exempt

Property No. 5	
<b>Creditor's Name:</b> <b>Wells Fargo Home Mortgage</b>	<b>Describe Property Securing Debt:</b> <b>Residence located at 16181 Mott Drive, Macomb, MI 48044.</b>

Property will be (check one):

Surrendered  Retained

If retaining the property, I intend to (check at least one):

Redeem the property  
 Reaffirm the debt  
 Other. Explain **Debtors intend to seek a loan modification.** \_\_\_\_\_

(for example, avoid lien using 11 U.S.C. § 522(f)).

Property is (check one):

Claimed as exempt  Not claimed as exempt

## PART B – Continuation

Property No.		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

Property No.		
<b>Lessor's Name:</b>	<b>Describe Leased Property:</b>	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> Yes <input type="checkbox"/> No

Continuation sheet 1 of 1

**United States Bankruptcy Court  
Eastern District of Michigan**

**IN RE:**

Case No. \_\_\_\_\_

**Lamontagne, William Scott & Lamontagne, Diane Marie**

Chapter **7** \_\_\_\_\_

Debtor(s)

**VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.

Date: **August 3, 2010**

Signature: */s/ William S. Lamontagne*  
**William S. Lamontagne**

Debtor

Date: **August 3, 2010**

Signature: */s/ Diane Marie Lamontagne*  
**Diane Marie Lamontagne**

Joint Debtor, if any

Asset Acquisition Group, LLC  
P.O. Box 370470  
Denver, CO 80237-0470

Beaumont Hospital - Grosse Pointe  
P.O. Box 5042  
Troy, MI 48007-5042

Beaumont Hospitals  
Business Center  
750 Stephenson Highway, P.O. Box 5042  
Troy, MI 48007-5042

Beaumont Reference Laboratory  
P.O. Box 5043  
Troy, MI 48007-5043

Buckles & Buckles, PLC  
P.O. Box 1150  
Birmingham, MI 48012

BYL Collection Services, LLC  
301 Lacey Street  
West Chester, PA 19382

Charter One Bank  
DDA Recovery RJE245  
P.O. Box 42023  
Providence, RI 02940

Charter One Bank  
One Citizens Plaza  
Providence, RI 02903

Chrysler Financial  
P.O. Box 9001921  
Louisville, KY 40290-1921

Citi  
P.O. Box 653095  
Dallas, TX 75265

City Of Fraser  
P.O. Box 2122  
Riverview, MI 48193-1122

Client Financial Services  
P.O. Box 7049  
Flint, MI 48507-0049

Comcast  
1500 Market St., Floor 33e  
Philadelphia, PA 19102-4782

Complete Fitness Rehabilitation  
2075 West Big Beaver, Ste. 601  
Troy, MI 48084

Congress Collection Corp  
24901 Northwestern Hwy, Ste. 300  
Southfield, MI 48075

Credit Protection Association LP  
P.O. Box 802068  
Dallas, TX 75380-2068

Delta Management Associates Inc.  
100 Everett Avenue, Ste. 6  
P.O. Box 9191  
Chelsea, MA 02150

Discover Card  
P.O. Box 6103  
Carol Stream, IL 60197-6103

Eastpointe Radiologists PC  
36175 Harper Ave.  
Clinton Township, MI 48035

Eastside Endoscopy Center  
28963 Little Mack, #103  
St. Clair Shores, MI 48081

First Federal Credit Control, Inc.  
24700 Chagrin Blvd., Ste. 205  
Cleveland, OH 44122-5662

Focus Receivables Management  
1130 Northchase Parkway, Ste. 150  
Marietta, GA 30067

GC Services Limited Partnership  
Collection Agency Division  
6330 Gulfton  
Houston, TX 77081

GI Medicine Associates PC  
28963 Little Mack, #101  
St. Clair Shores, MI 48081

Grosse Pointe Anesthesiologists PC  
P.O. Box 77124  
Detroit, MI 48277

Henry Ford Macomb Hospital  
P.O. Box 223015  
Pittsburgh, PA 15251-2015

Henry Ford Macomb Hospital  
P.O. Box 674144  
Detroit, MI 48267-4144

Home Depot Credit Services  
Processing Center  
Des Moines, IA 50364-0500

HSBC  
Payment Processing Center  
P.O. Box 5243  
Carol Stream, IL 60197-9918

HSBC Retail Services  
Art Van  
P.O. Box 7680  
Carol Stream, IL 60116-7680

Lakepointe Radiology PC  
P.O. Box 77000, D771336  
Detroit, MI 48277-1336

LG Barbe MD PC  
25990 Kelly Rd., Ste. 1  
Roseville, MI 48066

LTD Financial Services LP  
7322 Southwest Freeway, Ste. 1600  
Houston, TX 77074

Macomb Eye Care Specialists  
37555 Garfield, Ste. 100  
Clinton Twp., MI 48036

Macomb MRI  
Kirkwood Professional Bldg.  
42700 Schoenherr, Ste. 4  
Sterling Heights, MI 48313

Macomb Prompt Care  
Macomb Beaumont Medical Center  
43455 Schoenherr Rd., Ste. 19  
Sterling Heights, MI 48313

Macy's  
P.O. Box 689195  
Des Moines, IA 50368-9195

Medical Financial Solutions  
28000 Dequindre  
Warren, MI 48092

Medstar Ambulance Service  
380 N. Gratiot Ave.  
Clinton Township, MI 48036

Michigan Catholic Credit Union  
255 East Maple Road  
Troy, MI 48083

Midland Credit Management, Inc.  
P.O. Box 60578  
Los Angeles, CA 90060-0578

Mount Clemens Regional Medical Center  
P.O. Box 673532  
Detroit, MI 48267-3532

Nestor J. Truccone MD  
43380 Woodward Ave., Ste 105  
Bloomfield Hills, MI 48302

Northland Group, Inc.  
P.O. Box 390846  
Minneapolis, MN 55439

Outreach  
43455 Schoenherr, Ste. 2  
Sterling Heights, MI 48313

Path Specialists Of SE Mich PC  
P.O. Box 380890  
Clinton Township, MI 48038-0073

Premier Orthopedics & Sports Med PC  
20860 Harper Ave.  
Harper Woods, MI 48225

Professional Emerg Care  
P.O. Box 1257  
Troy, MI 48099-1257

Professional Recovery Services Inc.  
P.O. Box 1880  
Voorhees, NJ 08043

Rochester Knee & Sports Medicine PC  
3100 Cross Creek Parkway, Ste. 200  
Auburn Hills, MI 48326

Sam's Club/GEMB  
P.O. Box 530942  
Atlanta, GA 30353-0942

Sears Credit Cards  
P.O. Box 183081  
Columbus, OH 43218-3081

Senex Services Corp.  
P.O. Box 505  
Linden, MI 48451-0505

Shores Podiatry Assoc, PC  
20905 Twelve Mile Rd., Ste. 100  
Roseville, MI 48066

St. John Hospital  
3179 Solutions Center  
Chicago, IL 60677-3001

State Of Michigan  
DELEG - Unemployment Agency  
P.O. Box 9045  
Detroit, MI 48202-9045

The Leduc Group, PLLC  
4 Parklane Boulevard, Ste. 350  
Dearborn, MI 48126

Todd R. Wood DDS  
13552 Martin Road  
Warren, MI 48088

Washington Mutual  
P.O. Box 78065  
Phoenix, AZ 85062-8065

Wells Fargo Home Mortgage  
P.O. Box 6423  
Carol Stream, IL 60197-6423

William A. Lamontagne  
22280 John Deere Ln  
Macomb, MI 48044

William Beaumont Hospital  
500 Stevenson Highway  
Troy, MI 48007-5042

William Beaumont Hospital  
Business Center  
500 Stevenson Highway, P.O. Box 5042  
Troy, MI 48007-5042